

14-8-18

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 1
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 1
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... 1
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

a \$ 122-1
 a \$ 178-1

M. F. W. 62.
 503L-9-16.
 H. Q. 1772-99-835.

Handwritten notes: *28/6/00*

DISCHARGE DOCUMENTS

R. O. No. _____
 H. Q. No. _____

26095

CLYNIK. JOSE H
 Name.....
 Regt, No. **613.** Rank **Driver**
 Corps **Div 2^d Amm Column 2^d Cav Divison**
Died of Wounds
25-11-14

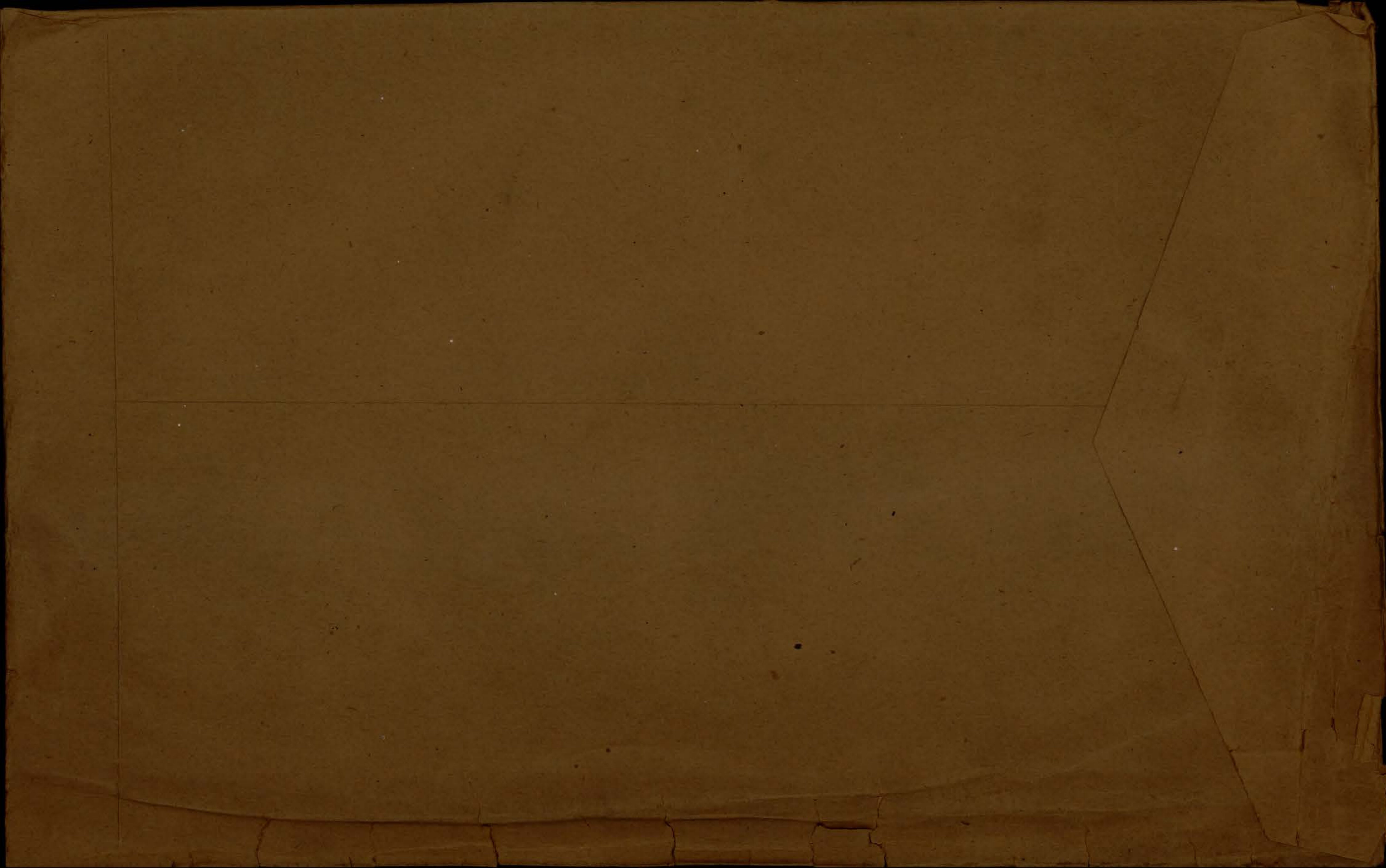
| | |
|------------------------|---------|
| Index Card | |
| Casualty Card | X |
| Non-effective Card | |
| Part II Order Card | X |
| Change of Address Card | |
| Pension & Award Card | |



Handwritten scribbles and numbers: *264*, *28/6*

41-16
 10-16
 5-16

7



Brynmia

ATTESTATION PAPER.

No. 613
Folio. 1

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... *Joseph Blynick # 613*
 2. In what Town, Township or Parish, and in what Country were you born?..... *London, England.*
 3. What is the name of your next-of-kin?..... *Mrs R. Blynick (wife)*
 4. What is the address of your next-of-kin?..... *1287, Massier St. Montreal*
 5. What is the date of your birth?..... *May 23rd 1881*
 6. What is your Trade or Calling?..... *Painter*
 7. Are you married?..... *Yes.*
 8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
 9. Do you now belong to the Active Militia?..... *Montreal Army Bgd.*
 10. Have you ever served in any Military Force?..... *" " "*
If so, state particulars of former Service.
 11. Do you understand the nature and terms of your engagement?..... *Yes*
 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*
- Joseph Blynick* (Signature of Man).
J. M. Muller Capt (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Joseph Blynick*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *March 15th 1915* *Joseph Blynick* (Signature of Recruit)
J. M. Muller Capt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Joseph Blynick*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *March 15th 1915* *Joseph Blynick* (Signature of Recruit)
J. M. Muller Capt (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Montreal* this *15th* day of *March* 1915.

Archie Miller (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit, *Justice of the Peace for the City & District of Montreal*
.....(Approving Officer)

Description of Joseph Glynn on Enlistment.

Apparent Age 34 years 11 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 6 1/4 ins.

*small spot left
Fore arm; tattoo mark.*

Chest measurement { Girth when fully expanded 40 1/2 ins.
 Range of expansion 4 ins.

Complexion Fair

Eyes Hazel

Hair Brown

Religious denominations. { Church of England
 Presbyterian
 Wesleyan
 Baptist or Congregationalist
 Other Protestants (Denomination to be stated.)
 Roman Catholic
 Jewish

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him fit for the Canadian Over-Seas Expeditionary Force.

Date March 15th 1915

Place Montreal

A. H. Tavenor Capt.
 Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Joseph Glynn having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

A. H. Tavenor Capt.
 (Signature of Officer)

Date March 15th 1915

oc # 4 Sect. D.A.C.

MEDICAL HISTORY SHEET.

Surname Blynick Christian Name Joseph

Examined { on 15th day of Mar 1915
 at Montreal

Approved by W. Ernest Nelson
 Rank Capt M.O.

Birthplace { City or Town London
 County England

Apparent age 34 yrs 11 mons

Trade or occupation Painter

Height 5 Feet 6 1/4 Inches.

Weight 189 Lbs.

Chest measurement { Minimum 36 1/2 inches.
 Maximum expansion 4 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right Left
 Number 1

When Vaccinated last _____

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection
Small spot left fore arm
Tattoo mark

| Date | Fit or Unfit | EXAMINED FOR RE-ENGAGEMENT, |
|------|--------------|-----------------------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | VACCINATIONS |
|----------------|-----------------|------------------------------|
| <u>5/12/15</u> | <u>Positive</u> | <u>W. Ernest Nelson</u> M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|-------------|---------------------------------|
| <u>4/10/15</u> | <u>Good</u> | <u>W. Ernest Nelson</u> M.O. |
| <u>4/22/15</u> | <u>Good</u> | <u>W. Ernest Nelson</u> M.O. |
| | | M.O. |

Enlisted on 15 day of March 1915 at Montreal

| | CORPS. | REG'TL NUMBER. | HABITS. | DATE. |
|----------------------|--------------------------|----------------|---------|----------------------|
| Joined on enlistment | <u>#4 Sec Dal.</u> | <u>613</u> | | <u>Mar 15th 1915</u> |
| Transferred to.. .. | <u>2nd Div. Amm. Co.</u> | | | |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION. | DATE. | DISEASE. | RESULT. |
|----------|-------|----------|---------|
| | | | |
| | | | |
| | | | |

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective ; the date and cause being stated on next page.

Certified, Officer of Records
K.G. 102/316.

Casualty Form—Active Service.

(Sect 3)

Regiment or Corps Divisional Ammunition Column
2nd Canadian Division

Regimental No. 613 Rank Driver Name Clynick, Joseph

Enlisted (a) 15-3-15 Terms of Service (a) Duration of War Service reckons from (a) 15/3/15

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|----------|--------------------|--|--------------------------------------|----------|--|
| Date | From whom received | | | | |
| | | | Arrived in France 16-9-15 | | |
| 2.6.16 | Unit | Granted 8 days leave | Field | 1.6.16 | B 213. P 2 O 26 |
| 15.6.16 | Unit | Rel'd from leave to England | " | 9.6.16 | B 213. DER 95 |
| 25/8/16 | " | Attached 4th Bde ARTT | Field | 25/8/16 | " Pt 2, O, No 37 4/9/16 |
| 30/9/16 | C.R.A. | Posted to 4th Art. Bde. | Field | 25/9/16 | P.C/1-121. d/ 25/9/16. P.II O. No 65. d/ 8/10/16. |
| Do | Do | Taken on strength 4th Bde. | Do. | 26/9/16 | P.C/1-121. d/ 25/9/16. P.II O. No 61 d/ 8/10/16. |
| 25-11-16 | G. C. C. S. | Died of Wounds S. W. Forehead (penetrating) | G. C. C. S. | 25-11-16 | Cas List R. 59572. Ref. file K.T. 137-2365 P.T.O. No. 105 D. Bd. 240 |

Amekeski
LIEUT.
OFFICER OF RECORDS
CANADIAN SECTION

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|--------------|--------------------|--|-------|------|---|
| Date | From whom received | | | | |
| | | | | | |

Rank

M

Name CLYNICK Joseph

✓ gm 4 Bon

Reg'l No. 613

Unit No. 4 Sec. Divl Amn Col

If in perm. Corps,
What Unit?

Married or Single Married

Place and Date of Enlistment Montreal, 15 March 1915

Place of Birth London, Eng.

Ref 25-6-2348
Jan 26th 17

Name and Address, Next-of-Kin

Mrs R. Clynick
1287 Messier St
Montreal

Relationship Wife

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship



Discharge, Date and Place

Reason

Character

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents |
|--------------|-------------------------------------|--|--------------|-------------------------|---|
| Date | From whom received | | | | |
| | | Embarked. S.S. Corinthian | Canada | May 16 th 15 | |
| | | Landed | England | - 27. | |
| 5 to 12-9-15 | Adj. Hqrs 2 nd D.A.C. | Taken on strength to 3 rd Section from 4 th Section disbanded | Otterpool. | 1-9-15 | Part II O 45 |
| 17 SEP 1915 | of Transport | Embarked S.S. France | Southampton | 6 SEP 1915 | |
| 30.6.16. | 2 nd D.A.C. | Granted 8 days leave of absence. | In the field | 1-6-16 | Pt II 26 |
| 4-9-16 | 4 th Bde | Attached from 2 nd D.A.C. for duty | " | 23-8-16 | Pt II 0 37 & 2 nd D.A.C. Pt II 0 37 df 4-9-16 |
| 9-10-16 | 2 nd D.A.C. | S.O.S. posted to 4 th Bde | " | 25-9-16 | - 65 |
| " | 4 th Bde | T.O.S. from 2 nd D.A.C. | " | 26-9-16 | - 61 |
| 12-12-16 | " | Died of wounds | " | 25.11.16 | Part II O 105 |

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents |
|---------|----------------------|--|------------|----------|--|
| Date | From whom received | | | | |
| 6.12.16 | 4 th Brig | Lied of Wounds | Hogbas bl. | 25.11.16 | 6.12.16 O.N. |

Register No. P. 6. 346.

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 3336-835

Regt'l No. 613. Name Joseph Clynick
(Christian Name) (Surname)
Unit 13 C. I. A. Rank Sur. Date of enlistment.....
Date of casualty 25-11-16 B.P.C. File No. 8335
Was service performed overseas? Yes

WPK

DEPENDENT

Name Mrs Rebecca Sophia Clynick Relationship Widow.
Address 1252 Messier St
Montreal,
Que.

M.F.W. 2652
25M-6-20.
H.Q. 1772-39-1473

Amount of Special Pension Bonus \$ 64.00 Abstracted by J.M. Davidson.

Eligible for Gratuity \$ 180.00
Less amount of Special Pension Bonus paid..... \$ 64.00
Less Debit Balance of S. A. or A.P..... \$

Total deductions \$ 64.00

Balance due \$ 116.00

D/S 18

Cheque No. 9. 1892150 Date issued 19. 7. 20

REMARKS :
.....
.....
.....

Clerk J. B. McPherson

Audited by
[Signature]
Date 12/7/20

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Surname Christian Name

Regimental Number Rank Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ per diem; Field Allowance \$ per diem. Separation Allowance \$ per month.

L.L. 53961—M. & D. 9721

| Total Credits 91 days | FIRST PAYMENT | | | SECOND PAYMENT | | | FINAL PAYMENT | | | Balance Overpayments to be Recovered | Total Amount Paid |
|--------------------------|-----------------|------|-------------------|-----------------|------|-------------------|-----------------|------|-------------------|---|-------------------------|
| | Cheque No. A | Date | Amount 30 days | Cheque No. P | Date | Amount 30 days | Cheque No. C | Date | Amount 31 days | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

M. F. W. 127
300M-1-19
1772-39-1140

Remarks.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

605

To Whom *M^{rs} R-S. Clynick*
Address *1287 Messier Street
M^t Royal Montreal.*

By Whom Assigned *Clynick-G.*
Regtl. No. *6/3 bas*
Rank *Gnr.*
Corps *N^o 4 Sect. Div. amm. Col.*

Rate *\$15⁰⁰* MAY 1 1915

PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|-------|------|---------------|------------|--|
| Aug. | 1914 | | | <i>Stop payment 1/14</i> <i>Died of wounds</i> <i>GM Dec 1/16</i> <i>Died of wounds Nov 25-16</i> <div style="border: 1px solid red; padding: 5px; display: inline-block;"> <i>Costs</i> </div> <i>Per Cable Col Ward 8-7-15</i> <i>F.V. 12-16</i> |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | <i>01113</i> | <i>15</i> | |
| June | | <i>01993</i> | <i>15</i> | |
| July | | <i>52094</i> | <i>15</i> | |
| Aug. | | | | |
| Sept. | | <i>3202</i> | <i>30</i> | |
| Oct. | | <i>41807</i> | <i>15</i> | |
| Nov. | | <i>28577</i> | <i>15</i> | |
| Dec. | | <i>010982</i> | <i>15</i> | |
| Jan. | 1916 | <i>12154</i> | <i>15</i> | |
| Feb. | | <i>12437</i> | <i>15</i> | |
| March | | <i>13059</i> | <i>15</i> | |
| | | | <i>165</i> | |

PENSION

APPROVED.....

OVER-PAY.....

RECOVERED.....

BY.....

B.P.C.....

GRANTED

Handwritten text in red ink, possibly a signature or date, oriented horizontally.



15-3-15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

185

Mrs
 Name *R. Clynick.*
 Address ¹²⁵⁰~~1284~~ *Missier St.*
Montreal, Que.

Name of Soldier *Clynick Joseph*
 Regtl. No. *613*
 Rank *Gunner.*
 Corps *(4 Sec) Div Amm Col.*
 To what Corps belonging
 when called out

Relation to Soldier
 wife, child or mother } *Wife*

PAYMENTS

| Month | Year | Cheque No. | Amount | REMARKS |
|-------|------|-------------------------------|------------------------|---|
| Aug. | 1914 | | | <i>refunded \$50⁰⁰ B.O.R. #1746 dated 21/6/15</i> |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | <i>H 2025</i> | <i>- 10 -</i> | <i>10</i> |
| Apl. | | <i>75861</i> | <i>20</i> | <i>20</i> |
| May | | <i>J 3746</i> <i>76801</i> | <i>50</i> <i>20</i> | <i>20</i> <i>receipt of \$50 requested 11/6/15 received 18/6/15</i> |
| June | | <i>A 973</i> | <i>20</i> | <i>20</i> |
| July | | <i>71865</i> | <i>20</i> | <i>20</i> |
| Aug. | | <i>88223</i> | <i>20</i> | <i>20</i> |
| Sept. | | <i>99172</i> | <i>20</i> | <i>20</i> |
| Oct. | | <i>M 7958</i> | <i>20</i> | <i>20</i> |
| Nov. | | <i>818051</i> | <i>20</i> | <i>20</i> |
| Dec. | | <i>K 13610</i> | <i>20</i> | <i>20</i> |
| Jan. | 1916 | <i>N 17532</i> | <i>20</i> | <i>20</i> |
| Feb. | | | | <i>20</i> |
| March | | | | |

ACCOUNT CLOSED
 DATE.....PER.....

7 8657 after H 8051
H 8658 H 8105
H 8659 8330
H 8660 8364
H 8661 8453
H 8662 8473
H 8663 8539
H 8664 8624

15/3/15

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.-4-16.
1772-39-818.

Sheet No. 2 Mr. R. Clynick

Name of Soldier Clynick Joseph
613

L. L. Job 310.-Req. 6374.

PAYMENTS.
wife.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|--------|-------|------------|------|--------------------|
| April | 1916 | | | |
| May | | F4501 | 80 - | 80 Mailed 16-5-16. |
| June | | H 9160 | 20 | 20 |
| July | | C6001 | 20 | 20 |
| Aug. | | K1442 | 20 | 20 |
| Sept. | | Q14800 | 20 | 20 |
| Oct. | | Z 18314 | 20 | 20 |
| Nov. | | B21764 | 20 | 20 |
| Dec. | | B25334 | 20 | 20 |
| Jan. | 1917 | B 28965 | 20 | 20 |
| Feb. | | | | 20 |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

a/c closed pension granted 26-11-16 ✓

ACCOUNT CLOSED

DATE *✓* PER *W*

\$ 43³³ Recovered as per Pensions list Jan 1918 with 27²/₁₇

PENSION

| |
|-------------------------|
| A. CLOSED..... |
| OVER-PAYT..... |
| RECOVERED..... |
| BY <i>B.L.</i> 13-12-17 |

GRANTED

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

PAYMENTS.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|--------|-------|------------|------|----------|
| Aug. | 1918 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1919 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1920 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS
PAYMENTS.

606

M. F. W. 12a.
 60m.—12-15.
 1772—39—319.

Sheet No. 2. Mrs R. S. Blynick

Wife
 PAYMENTS.

Name of Soldier Blynick S
 #A Sec Div Am Colm

L. L. Job 8902.—Req. 6213.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|--------|-------|------------------|---------------|------------------|
| | | | | #1500 |
| April | 1916 | 71840 | 15 | |
| May | | 04332 | 15 | |
| June | | 7750 | 15 | |
| July | | E7186 | 15 | |
| Aug. | | H11287 | 15 | |
| Sept. | | O17807 | 15 | |
| Oct. | | 719623 | 15 | |
| Nov. | | M24486 | 15 | |
| Dec. | | 32685 | 15 | Act closed. Cas. |
| Jan. | 1917 | | 15 | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

Casualties
 Pension Granted 26/11/16

F. X. Rend. Date Total 285.00 By ...
 20/7/17 By ...

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|--------|-------|------------|------|----------|
| Aug. | 1918 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | 1919 | | | |
| Jan. | | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | 1920 | | | |
| Jan. | | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |

No.

RANK

Bomb.

NAME

*Clyrick Th. J.*T. O. S. *10-12-14*

UNIT

*Ammunition Column (6th Brigade C. F. A.)
(2nd. Contingent)**Dec. Paylist*

M. D.

4

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID

PAID

SIG.
OR
REC'T

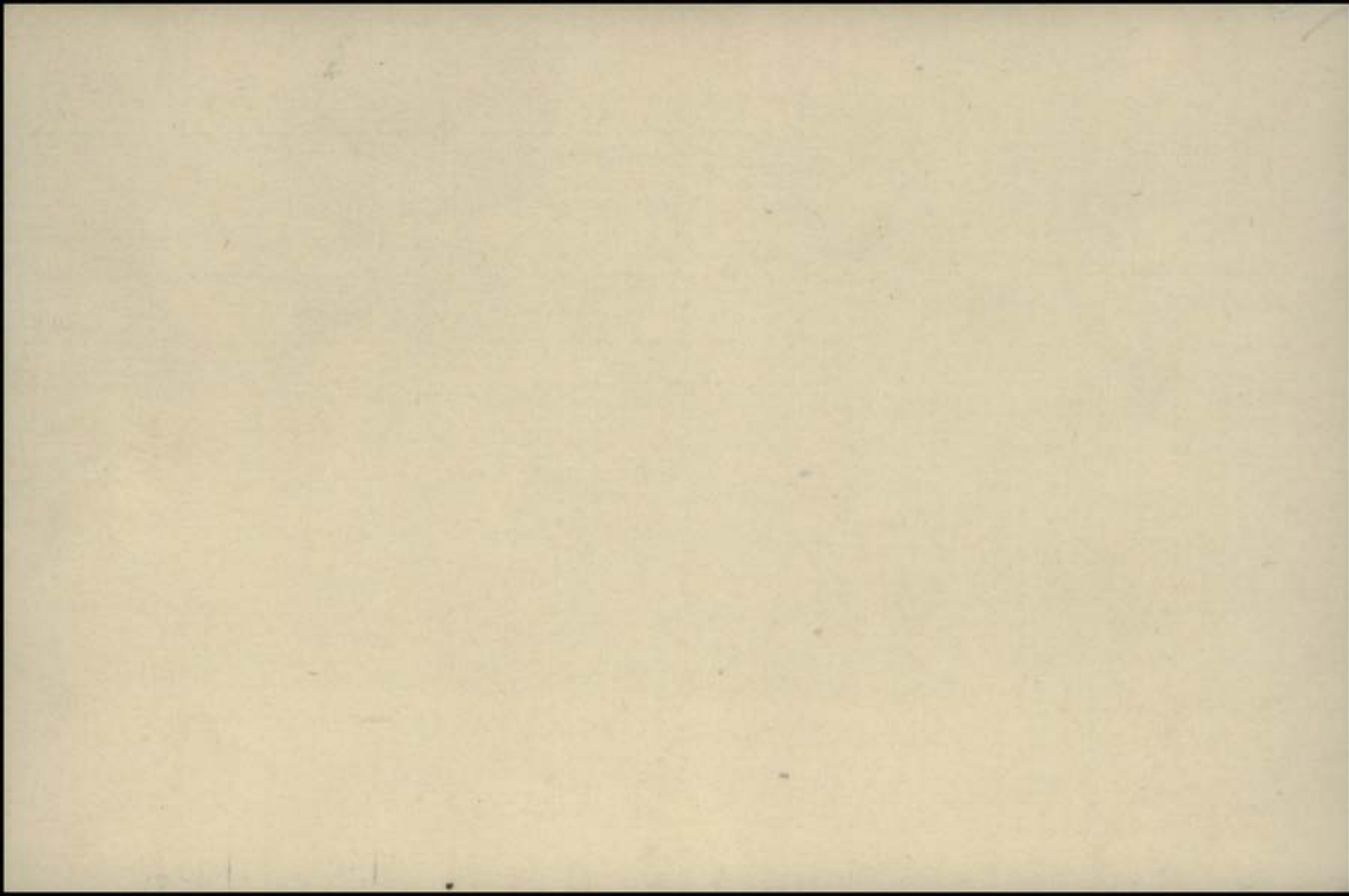
FROM

TO

PARTICULARS

AUTHORITY

*1914**1914**Dec. 10**Dec. 31**1915 Jan 1915**Feb.**✓**✓**✓**Shown as corp***UNIT SAILED
FEB 23 1915**



Name **CLYNICK. Joseph** Rank **Driver.** Reg. No. **613.**

Unit **4th. Brigade Can. Fld. Arty.**

Next of Kin **CANADA.**

P.L. 7911 C-2048.

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|--------|---------------------------|----------|----------------------|----------|-----------------|-----------|
| 1916. | | | | | | |
| 25-11. | No. 9. Cas. Clg. Station. | | <i>S.W. Forehead</i> | | | |
| | DIED OF WOUNDS. | | (Not Stated.) | A241. | | |
| | Ottawa Cabled. | 5-12-16. | | 0.5915. | | |
| | | | | | | |

Clynick. Joseph. Gnr. 613. H. A. G. Div. Comm. Cd.
with Rde. C.F.A.

OK for Star. 14-15.

Div Comm. Cab. Over.

Medals etc. Widow - Mrs R. S. Clynick
1252 Messier St.

Scroll Desp. FEB 12 1921 Regn No. 7-19281

Montreal

P. & S. OCT 11 1921 Regn No. 99717
do

Serial No 779723

Desp. JUL 19 1920 (Dr.) C. 15532.

Mem. W. do Desp. JUL 19 1920 (M.) C. 15537.

also with - Eliza Clynick.
1296 Fullum St.
Montreal

W.

AA
W.

M x Retd $6 \frac{8}{20}$
not called for.

465

Clynick, Dvr. Jos., #613,
4th Bde. C.F.A.

H.Q. 649-C-4166.

M. & D. (Widow) Mrs. R. S. Clynick,
1252 Messier St., Montreal, P.Q.

P. & S. " Ditto.

Mem. C. (2) " Ditto.

Note:

Widow receives two Memorial Crosses in this case
as the mother of the soldier died subsequently to him.

DESPATCHED

11690 $\frac{23}{3}$
21

[Handwritten signature]
[Handwritten initials]

34

no. 100.

~~B~~
~~V~~

Number 613 Rank Driver

Surname CLYNICK

Christian Names Joseph

Unit 67a Theatre of War, France

Date of Service 16-9-15- ~~D~~

Remarks

Latest Address Mrs. R. S. Clynick (w)

..... 1252, Messier St.

Roll No. ~~B~~ Page 2953 Montreal P.Q.

4. 15440/ 100p

APR 2 1911

N. *Clynick Joseph*

RANK AND CORPS

Sgt. 4th Bgde. C 7 A. (form. Div Am. Col. No 4 regt.)

CABLE

NO.

DATE

NATURE OF CASUALTY

*C. 5915**5-12-16**Died of wounds, no. mine cas.
clearing station, Nov. 25th.
1916. Nature of wounds not
yet reported ✓**B2090a Rorer 2-12-16**(rec'd 3-3-17)**Died of wounds. (S.W. forehead penetrating)
#9 cas. hl. Station 25-11-16*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Q 241 No 9 Cas el Stat

25-11-16

Died of wounds.

649-C-4166

CARD NO.

D

FOLL.

SURNAME. *Clynick*

CHRISTIAN NAMES *Joseph*

REGL. NO. *613* RANK *Pte*

UNIT *Div Amm, Col. no. 4 Sect.*

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Clynick Mrs R.*

RELATIONSHIP TO SOLDIER *Wife.*

ADDRESS ~~*1287 Messier St., Montreal PQ*~~
1250 Messier St.,
auth. 649-C-4166.

COUNTRY OF BIRTH *England. London.*

DATE *May 23/1881*

PLACE OF ATTESTATION *Montreal*

DATE *Mar. 15-15'*

8/5 16-5-15-83

MARRIED

yes.

SINGLE

WIDOWER

TRADE OR CALLING

Painter.

RELIGION

not stated.

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

5-6

FEET

6 1/4

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

Fair

EYES

Hazel

HAIR

Brown

DISTINGUISHING MARKS

*Small spot left forearm
tattoo mark.*

MEDICAL EXAMINATION.

PLACE

DATE

| | | | | |
|---------|-------------------------|----------|-------|--------|
| Surname | Christian Name or Names | Reg. No. | | |
| Clynick | J. | 613 | | |
| Rank | Unit | Co. | Troop | Batty. |

| | | |
|------------------|------------|-------------------|
| Dvr. Hospital | 4th C.F.A. | Date of Admission |
|------------------|------------|-------------------|

9 Cas. Clg. Station
Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died of Wounds 25.11.16

DISPOSITION

Date

C.L. 6.12.16 A241

REMARKS

A.M.D. 2 DEPT.
Beh. of D.G.M.S. O.M.F.C. London

88

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank *Ev.*

Name

GLYNICK Joseph

Reg'l No. 613

Unit

No. 4 Sec. Divl Armn Col

If in perm. Corps,
What Unit?Married or Single **Married**Place and Date of Enlistment *Montreal, 15 March 1915*Place of Birth *London, Eng.*Name and Address, Next-of-Kin *Mrs R. Glynick
1287 Messier St
Montreal*Relationship **Wife**Assigned Pay Monthly \$ *15.00*Payable to *next of kin*

Relationship

Separation Allowance \$

Payable to

*Entered on N.E. Card Index*Discharge, Date and Place *Died of wounds* Reason *25th/16 Q 1241* Character

Relationship

6.12.16

| Date | | PAY | | | Field Allowance | | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned pay | Other Charges | Total Debits | Balance | Remarks, Casualties, etc. | |
|----------------|-----------------|-------------|-------------|------------|-----------------|------------|----------|---------------|--------------------------------------|------------|------|---------------|--------------|---------------|--------------|-----------|---------------------------|-----------|
| From | To | No. of Days | Rate | Amount | No. of Days | Rate | Amount | | | No. | Date | | | | | | | |
| <i>June 1</i> | <i>June 30</i> | <i>30</i> | <i>1.00</i> | <i>30</i> | <i>30</i> | <i>.10</i> | <i>3</i> | <i>15</i> | <i>48</i> <i>33</i> | | | | <i>15</i> | | <i>15</i> | <i>33</i> | <i>30 days</i> | |
| <i>July 1</i> | <i>July 31</i> | <i>31</i> | <i>1.00</i> | <i>31</i> | <i>31</i> | <i>.10</i> | <i>3</i> | <i>10</i> | <i>48</i> <i>50</i> <i>107</i> | | | <i>40</i> | <i>15</i> | | <i>55</i> | <i>27</i> | <i>60</i> | |
| <i>1/8/15</i> | <i>31/8/15</i> | <i>31</i> | <i>1.00</i> | <i>31</i> | <i>31</i> | <i>.10</i> | <i>3</i> | <i>10</i> | <i>34</i> | | | <i>29</i> | <i>15</i> | | <i>44</i> | <i>20</i> | <i>18</i> | |
| <i>1/9/15</i> | <i>30/9/15</i> | <i>30</i> | <i>1.</i> | <i>30</i> | <i>30</i> | <i>.10</i> | <i>3</i> | <i>-</i> | <i>33</i> | | | <i>22</i> | <i>15</i> | | <i>37</i> | <i>63</i> | <i>13</i> | |
| <i>1/10/15</i> | <i>31/10/15</i> | <i>31</i> | <i>1.</i> | <i>31</i> | <i>31</i> | <i>.10</i> | <i>3</i> | <i>10</i> | <i>34</i> | | | <i>5</i> | <i>15</i> | | <i>20</i> | <i>23</i> | <i>27</i> | |
| <i>1/11/15</i> | <i>30/11/15</i> | <i>30</i> | <i>1.</i> | <i>30</i> | <i>30</i> | <i>.10</i> | <i>3</i> | <i>-</i> | <i>33</i> | | | <i>5</i> | <i>15</i> | | <i>20</i> | <i>29</i> | <i>40</i> | |
| <i>1/12/15</i> | <i>31/12/15</i> | <i>31</i> | <i>1.</i> | <i>31</i> | <i>31</i> | <i>.10</i> | <i>3</i> | <i>10</i> | <i>34</i> | | | <i>5</i> | <i>15</i> | | <i>20</i> | <i>23</i> | <i>54</i> | |
| <i>1/1/16</i> | <i>31/1/16</i> | <i>31</i> | <i>1.</i> | <i>31</i> | <i>31</i> | <i>.10</i> | <i>3</i> | <i>10</i> | <i>34</i> | | | <i>5</i> | <i>15</i> | | <i>20</i> | <i>23</i> | <i>68</i> | |
| <i>1/2/16</i> | <i>29/2/16</i> | <i>29</i> | <i>1.</i> | <i>29</i> | <i>29</i> | <i>.10</i> | <i>2</i> | <i>90</i> | <i>31</i> | | | <i>5</i> | <i>15</i> | | <i>20</i> | <i>24</i> | <i>79</i> | |
| <i>1/3/16</i> | <i>31/3/16</i> | <i>31</i> | <i>1.</i> | <i>31</i> | <i>31</i> | <i>.10</i> | <i>3</i> | <i>10</i> | <i>34</i> | | | <i>5</i> | <i>15</i> | | <i>20</i> | <i>23</i> | <i>93</i> | |
| | | | | <i>305</i> | | | | <i>3050</i> | <i>3159</i> | <i>367</i> | | <i>123</i> | <i>28</i> | | <i>150</i> | <i>00</i> | <i>273</i> | <i>28</i> |

BALANCE TRANSFERRED TO NEW LEDGER

Checked *Lewth*

Settled.



Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

| Date | Brief details, and signature |
|---------|------------------------------|
| 5/12/15 | Vaccination W Ernest Ullsur |
| 4/10/15 | |
| 22/4/15 | Anti-Typhoid Inoculations " |

Table IV.—Service Table.

| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation | Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
|----------------------|--------------------------------|-------------------------------------|----------------------|--------------------------------|-------------------------------------|
| | | | | | |

DUPLICATE

6 1 3

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname C L Y N I C K Christian Name Joseph

TABLE I.—GENERAL TABLE.

Birthplace ... Parish London County Eng
 Examined ... { on 15th day of Mar 1915
 { at Montreal
 Declared Age ... 34-11 years ... days.
 Trade or Occupation ... Painter
 Height ... 5 feet, 6 $\frac{1}{4}$ inches.
 Weight ... 189 lbs.
 Chest Measurement { Girth when fully Expanded. 36 $\frac{1}{2}$ inches.
 { Range of Expansion 4 inches.
 Physical Development ... Good
 Vaccination Marks { Arm ... Right Left
 { Number 1
 When Vaccinated ...
 Vision ... { R.E.—V=
 { L.E.—V=
 (a) Marks indicating congenital peculiarities or previous disease ...
 (b) Slight defects but not sufficient to cause rejection ... Smallspot left Forearm Tattoo mark

Approved by (Signature) W Ernest Ullsur
 (Rank) Capt A.M.C Medical Officer.

Enlisted ... { at Montreal
 { on 15th day of March 1915

| Corps. | Regtl. No. |
|------------------------|--------------|
| <u>4 Sec SD A C</u> | <u>6 1 3</u> |
| <u>2nd Div AMM Col</u> | |

Became non-effective by
 on _____ day of _____ 1915
 (Signature) _____
 (Rank) _____

I certify the foregoing to be a true copy of a original entry for the Officer in Charge of Records Canadian Contingents.

W.R. WARD,
 Colonel in Charge of Records,
 Canadian Contingents.

MARRIED OR SINGLE *m.*

PLACE OF BIRTH *London, Eng.*

NAME AND ADDRESS OF NEXT OF KIN *Mr. C. Slynick,
1287 Massie St. Montreal.*

RELATIONSHIP OF NEXT OF KIN *wife.*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|----------------------|-----------------|------------------|
| <i>Dir of wounds</i> | <i>25/11/16</i> | <i>80105</i> |
| | <i>25/11/16</i> | <i>4/2/12/16</i> |
| | <i>25/11/16</i> | <i>6/2/24/16</i> |
| | | <i>6/12/16.</i> |

ADMISSIONS TO HOSPITAL, &c.

| DATE ADMITTED | DATE DISCHARGED | V. OR A. | NAME OF HOSPITAL |
|---------------|-----------------|----------|------------------|
| | | | |
| | | | |
| | | | |

REG'L. No. *618* RANK *Gnr.* NAME *Slynick*
 IF IN PERM. CORPS | UNIT *2nd Bde* TRANSFERRED TO *4th Bde C9a* DATE *16-10-16* AUTHORITY *8065-8/16*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *N.E. 1/2* DATE *24/11/16* AUTHORITY *80105.*
 PLACE OF ATTESTATION *Montreal* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *March 15th 1917* TRANSFERRED TO DATE AUTHORITY *P.B. 70*
 ASSIGNED PAY MONTHLY \$ *15⁰⁰* DATE EFFECTIVE
 PAYABLE TO *Mr. Slynick, 1287 Massie St. Montreal* RELATIONSHIP
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *7-12-16* EFFECTIVE *1-1-17* REASON *Dir of wounds 25-11-16*
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *24 11 16* Entered on N.E. Card Index
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by *F Harris*

COMPILED BY
CHECKED BY



| DATE | PAY | | FIELD ALLOWANCE | | WORKING OR SPECIAL PAY | | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS | | | | CASH PAYMENTS | | | | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE | | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | REMARKS |
|------------------------|-------------|------------|-----------------|-------------|------------------------|----------|----------------------|---------------|-------------------------------------|-------------------|------|--------|---|---------------|-------------------|------------|-----------|---------------------|--------------------------|--------------|--------------|---|--------------------------|--|-------------------------------------|
| | No. OF DAYS | RATE | AMOUNT | No. OF DAYS | RATE | AMOUNT | | | | No. OF DAYS | RATE | AMOUNT | 1 | 2 | 3 | 4 | 1 | | | | 2 | 3 | | | |
| <i>April</i> | | | | | | | | | <i>267 07 1</i> | | | | | | | | | | <i>373 25 93 79</i> | | | | | | |
| <i>1-30</i> | <i>30</i> | <i>100</i> | <i>30</i> | <i>20</i> | <i>10</i> | <i>3</i> | | | <i>396 28 4 16</i> | | | | | | | | | | <i>20 29 106 56</i> | | | | | | |
| <i>May 31</i> | <i>31</i> | <i>31</i> | <i>31</i> | <i>31</i> | <i>310</i> | | | | <i>34 10 412 484</i> | | | | | <i>255</i> | <i>262</i> | | | <i>15</i> | <i>22 66 118 00</i> | | | | | | |
| <i>June 30</i> | <i>30</i> | <i>30</i> | <i>30</i> | <i>3</i> | | | | | <i>33 490 534</i> | | | | | | <i>255</i> | | | <i>15</i> | <i>20 11 30 89</i> | | | | | | |
| <i>July 31</i> | <i>31</i> | <i>31</i> | <i>31</i> | <i>310</i> | | | | | <i>34 10 558 266 622 107</i> | | | | | <i>5 11</i> | <i>8 72</i> | | | <i>15</i> | <i>28 83 136 16</i> | | | | | | |
| <i>Aug 31</i> | <i>31</i> | <i>31</i> | <i>31</i> | <i>310</i> | | | | | <i>34 10 640 297 708 128 849 76</i> | | | | | <i>2 61</i> | <i>2 62 48 67</i> | | | <i>15</i> | <i>68 90 101 36</i> | <i>200</i> | <i>99 36</i> | | | | |
| <i>Sept 30</i> | <i>30</i> | <i>30</i> | <i>30</i> | <i>3</i> | | | | | <i>33 781 16 9 16</i> | | | | | <i>5 23</i> | | | | <i>15</i> | <i>20 23 114 13</i> | | | | | | |
| <i>Oct 15</i> | <i>15</i> | <i>15</i> | <i>15</i> | <i>150</i> | | | | | <i>16 50</i> | | | | | | | <i>262</i> | | <i>15</i> | <i>17 62 113 01</i> | | | | | <i>Slid to 4th Bde No 65-8-10-16</i> | |
| <i>Nov 46</i> | <i>46</i> | <i>46</i> | <i>460</i> | | | | | | <i>58 4 87 1008 20 10 103 10 10</i> | | | | | <i>5 23</i> | | | <i>15</i> | <i>22 83 140 76</i> | | | | | | | |
| <i>Dec -</i> | | | | | | | | | <i>1180 10 11</i> | | | | | <i>5 23</i> | | | | <i>15</i> | <i>24 93 112 83</i> | | | | | <i>Dir of wounds 23-11-16</i> | |
| | | | | | | | | | <i>635 44</i> | | | | | | | | | | <i>4 70 24 93 112 83</i> | | | | | <i>80105 overcredited 4 days Nov 16.</i> | |
| <i>N.E. March 1917</i> | | | | | | | | | <i>15 00</i> | | | | | | | | | | <i>112 83</i> | | | | | | <i>N.E. 1-1-17</i> |
| <i>May 1917</i> | | | | | | | | | <i>2 20</i> | <i>2 20</i> | | | | | | | | | <i>127 83</i> | | | | | | <i>1500 Apr Dec 1916 recredited</i> |
| <i>16 July 17</i> | | | | | | | | | | | | | | <i>130 03</i> | | | | | <i>130 03</i> | | | | | | <i>71-8-593-1-12-20/1/16</i> |

Checked by *G. Antikwan*



A.P. Starts 1/5/15
Learn A.P. 29502 In agreement with Ottawa Slip 71-8-593-1-12 20/1/16.

1500 Apr Dec 1916 recredited
71-8-593-1-12-20/1/16
220 to correct date of
13003 Ottawa Cash for
170
23/6/17

